24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E) FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
NCLR Action PAC	
	C C00626390
Check if 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee	Date of Public Distribution/Dissemination
One Vanilla Card	10 27 Y Y Y Y Y
Mailing Address PO Box 826	10 27 2016 Amount
	Code 670.21
	808-0826 Transaction ID : VSGF29TQF07 Date of Disbursement or Obligation
Purpose of Expenditure Prepaid Debit Card	Category/
Name of Federal Candidate	Support Office Sought: House District:
Clinton, Hillary, , ,	Oppose
Calendar Year-To-Date	Disbursement For: Primary X General
	93155.06 2016 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Solidarity Strategies	10 27 / Y Y Y Y Y
Mailing Address 1090 Vermont Ave NW	10 21 2010
Ste 300	Amount
	o Code 54999.75
Washington DC 20	0005-4966 Transaction ID : VSGF29TRQS9 Date of Disbursement or Obligation
Purpose of Expenditure GOTV Phone Calls	Category/
GOTV FIIOTIE Calls	Type 006 10 27 2016
Name of Federal Candidate	Support Office Sought: House District:
Clinton, Hillary, , ,	Oppose
Calendar Year-To-Date	Disbursement For: Primary X General
	93155.06 2016 Other (specify) >
(a) SUBTOTAL of Itemized Independent Expenditures	55669.96
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	55669.96
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Gonzalez, Lawrence, , , [Electronical	ly Filed] Date 10 28 2016
Signature	